

ICD-10 Post Implementation Update: October 7, 2015

On Thursday, October 1st 2015, we transitioned from the ICD-9 to the ICD-10 coding system. As of today, ICD-10 claims have been submitted and processed with no major issues. Thank you for supporting a smooth transition!

Claims statistics for ICD-10 activity through October 6th:

- 4,223 EDI claims have been submitted
 - 3,764 EDI claims were accepted
 - 459 EDI claims rejected
- 1,919 DDE claims have been entered on the portal
- 4,106 claims completed the initial adjudication process
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Some claims have been rejected, but most of them have been resubmitted successfully after some guidance from our Provider Services staff.

A list of common claims rejection errors, explanations of the rejections, and the solutions can be found below.

Top ICD-10 Claims Rejection Errors

System error number and/or sample message:	Explanation of error:	Solution:
0x3939669 - Value of sub-element HI01-01 is incorrect. Value 'example Qualifier code' may not be used.	The diagnosis code qualifier used was for ICD-10. The ICD-10 code qualifier cannot be used for transactions with dates of service prior to 10/01/2015, the ICD-10 cutover date.	If the diagnosis is coded with a qualifier for ICD-10, then the dates of service must be on, or after, 10/01/2015.
0x3939676 - Value of sub-element HI11-01	The transaction had dates of service on, or after, the ICD-10 implementation date. The	Use ICD-10 codes on all claims with dates of service on, or after, 10/01/2015.



is incorrect.	diagnosis code and code qualifier should be ICD-10.	
0x81002b - The length of Sub-Element SV107-01 (Diagnosis Code Pointer) is '5.'	<p>SV107-01 is the diagnosis code pointer and is a numeric number that points to which diagnosis code is the primary one for the service line (for example, if the first diagnosis code that was specified was the primary one, the value of this field would be 1).</p> <p>There are two possible error types:</p> <p>1) A diagnosis code was erroneously entered when a diagnosis code pointer was required.</p> <p>2) Too many pointers (4+) were entered.</p> <p>The exact nature of the error can be found in the Business Rejection Report (BRR).</p>	<p>Please ensure that you do the following to correct these rejections:</p> <p>1) The diagnosis code pointer is in the correct location, and has not been substituted incorrectly by the diagnosis code.</p> <p>2) Do not use more than three diagnosis code pointers.</p>
0x810050 - Sub-Element HI01-02 (Industry Code) is missing.	The diagnosis code is missing from the HI segment. The file was submitted without the diagnosis code.	Enter the diagnosis code and rebill. If the problem persists, please contact your software vendor.
0x393964c 5 - External Code Set Normal.	An ICD-10 code qualifier was submitted with an ICD-9 diagnosis code, instead of an ICD-10 one.	<p>Enter the correct diagnosis and qualifier codes. The qualifier and the diagnosis code must match the diagnosis code and code qualifier must either be in ICD-9 or ICD-10 format.</p> <p>Refer to the date of service to determine which code to use. ICD-9 codes are required for dates of service on, or before, 9/30/15. ICD-10 codes are required for dates of</p>



		service on, or after, 10/01/15.
0x393966a	An ICD-9 diagnosis code was used instead of an ICD-10 diagnosis code for a transaction with dates of service on, or after, 10/01/2015.	Use ICD-10 codes on all claims with dates of service on, or after, 10/01/2015. If you need help determining the ICD-10 code, please ask the clinical professional or PCP. You may also refer to the ICD-10 coding book or CMS GEMs tool for coding from ICD-9 to ICD-10.
0x3939631	An ICD-9 code qualifier was submitted with an ICD-10 CM diagnosis code.	<p>Start by verifying the date of service. ICD-9 codes are required for dates of service on, or before, 9/30/15. ICD-10 codes are required for dates on, or after, 10/01/15.</p> <p>The qualifier and the diagnosis code must match the diagnosis code and code qualifier must either be in ICD-9 or ICD-10 format.</p>
0x9999026	<p>Pay To Affiliation Error: No Affiliation found to Pay To Provider.</p> <p>This error message may be caused by different factors, including:</p> <ol style="list-style-type: none">1) The order in which the pay to (group), National Provider Identifier (NPI), and the location code was entered.2) The type of bill (e.g., 1500 v. UB04).	<p>For 1500 bills: The rendering provider must be affiliated to the pay to (group), NPI, and the service location on the claim.</p> <p>The service location identifier should always start with the Pay To (group), then NPI, followed by a hyphen and a 3 digit location code.</p> <p>For UB04 bills: The service location and NPI must match the pay to NPI and be in the correct format in order to be recognized.</p> <p>Refer to billing instructions for more detail.</p>
0x9999002	Invalid billing Provider. Billing Provider ID not found or Invalid Rendering Provider. Rendering	First, check if the provider is enrolled with MaineCare. This can be done by verifying the NPI. Check to see if the NPI billed on the claim

	provider ID not found on file.	is in QNXT. If not, the provider is not enrolled and must be enrolled with MaineCare before submitting claims.
0x9999201	Future Service Dates are invalid.	A provider cannot bill for dates of service that have not yet occurred. Correct and rebill.

ICD-10 Codes for Prior Authorization (PA) Requests, TR 52642

Please use ICD-10 codes for all PA requests you submit going forward.

OMS has identified an issue with PAs submitted through the Health PAS Online Portal. MIHMS is accepting ICD-9 codes for PAs when the initial submission date is on, or after, October 1, 2015 in error. PAs received on, or after, October 1, 2015 should be rejected if they contain an ICD-9 code because an ICD-10 code is required. We are working to correct this issue and will notify you through e-message when it is resolved. Thank you for your help in supporting a smooth transition.

GEMS 2016 Code Release

The 2016 GEMs code alternatives took effect on 10/1/15. They are posted on the [Centers for Medicare & Medicaid Services \(CMS\) webpage](#).